



City of Troy, Ohio

Non-Residential Certification For Tax Exemption Community Reinvestment Area Tax Exemption Program

Certification for Tax Exemption in the City of Troy, Ohio located in the County of Miami is filed on behalf of _____ so that taxes on the project described below are exempted in accordance with the Community Reinvestment Area Program established by the City of Troy, Ohio pursuant to O.R.C. §3735.66.

1. a. Name of business, home or main office address, contact person, and telephone number (attach additional pages if multiple enterprise participants).

_____	_____
business name	contact person
_____	_____
	telephone number

address	

- b. Project site:

_____	_____
street address	contact person
_____	_____
city lot number	telephone number
D08-_____	
tax parcel number	

2. a. Nature of business (manufacturing, warehousing, wholesale or retail stores, or other).

- b. List primary 4 digit Standard Industrial Code (SIC) # _____
Business may list other relevant SIC numbers.

- c. Form of business (corporation, partnership, proprietorship, or other)

3. Does the Enterprise owe:

a. Any delinquent taxes to the State of Ohio or a political subdivision of the State?
Yes___ No___

b. Any moneys to the State or a state agency for the administration or enforcement of any environmental laws of the State? Yes___ No___

c. Any other moneys to the State, a state agency or a political subdivision of the State that are past due, whether the amounts owed are being contested in a court of law or not.
Yes___ No___

d. If yes to any of the above, please provide details of each instance including but not limited to the location, amounts and/or case identification numbers (add additional sheets if necessary)

4. Project Description:

5. Project was started _____, 20__ and completed _____, 20__.

6. The amount invested by the business to establish, expand, renovate or occupy the facility:

A. Acquisition of Buildings:	\$ _____
B. Additions/New Construction:	\$ _____
C. Improvements to existing buildings:	\$ _____
Total New Project Investment	\$ _____

7. Business requests a real property tax exemption of ___ % for ___ years.

8. Does the project involve a structure of historical or architectural significance?
() NO () YES - if yes, attach written certification or significance as issued by appropriate authority.

9. The applicant shall provide annual investment and payroll information not later than February 15th for each year that the exemption is in place.

Submission of this certification expressly authorizes The City of Troy, Ohio and/or Miami County, Ohio to contact the Ohio Environmental Protection Agency to confirm statements contained within this application including item #3 and to review applicable confidential records. As part of this application, the business may also be required to directly request from the Ohio Department of Taxation or complete a waiver form allowing the Ohio Department of Taxation to release specific tax records to the local jurisdictions considering the incentive request.

Applicant agrees to supply additional information upon request.

The applicant affirmatively covenants that the information contained in and submitted with this application is complete and correct and is aware of the ORC Sections 9.66(C)(1) and 2921.13(D)(1) penalties for falsification which could result in the forfeiture of all current and future economic development assistance benefit as well as a fine of not more than \$1,000.00 and/or a term of imprisonment of not more than six months.

Name of the Business

Date

Signature

Typed Name and Title

STATE OF OHIO:

COUNTY OF MIAMI: ss

On this _____ day of _____, 20____, before me, a Notary Public in and for Miami County, State of Ohio, personally appeared _____, and acknowledged that they did sign the foregoing instrument and that the execution of said instrument is their voluntary act and deed for the purposes therein expressed.

IN WITNESS WHEREOF, I have hereunto subscribed my name and affixed my official seal on the date and year aforesaid.

Notary Public

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DO NOT WRITE BELOW THIS LINE -- FOR OFFICE USE ONLY

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VERIFICATION OF INFORMATION BY HOUSING OFFICER

- ____ 1. Owner & property identification, including Tax Parcel No.
- ____ 2. Located in which Community Reinvestment Area (Area #____)
- ____ 3. Category of Exemption: Section 3735.67(a) _____ (10 years)
 Section 3745.67(b) _____ (12 years)
 Section 3735.67(c) _____ (15 years)
- ____ 4. Is there Historical or Architectural Significance?

I certify that the project described herein meets the necessary requirements for ____ years exemption under Section 3735.67(____) of the Ohio Revised Code as provided in Resolution Number R-7-79, R-31-87, R-22-88, R-37-88, R-22-89, R-23-89, R-49-91, R-60-91, R-33-94, R-34-94 or R-35-94 of the City of Troy, Ohio.

Date of Approval

Housing Office